



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: February 1 - May 1

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2022

**1. Corporate ID No.** 001015207

**2. Name of Corporation** The Heather Abbott Foundation

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

**4. Principal Office Address**

No. and Street: 181 BELLEVUE AVENUE, #407

City or Town: NEWPORT

State: RI Zip: 02840 Country: USA

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

EXCLUSIVELY FOR CHARITABLE PURPOSES WITHIN THE MEANING OF SECTION 501C3 OF THE INTERNAL REVENUE CODE OF 1986 CORPORATION SHALL GRANT SPECIALIZED PROSTHETIC DEVICES

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	HEATHER ABBOTT	7 ANTHONY COURT

		NEWPORT, RI 02840 USA
TREASURER	JAMES BANKS	PO BOX 1488 HILLSBOROUGH, NH 03244 USA
SECRETARY	JAMES BANKS	PO BOX 1488 HILLSBOROUGH, NH 03244 USA
VICE PRESIDENT	MALINA JACOBOWITZ	9513 SHEPHERD HILLS DR. LORTON, VA 22079 USA
DIRECTOR	HEATHER ABBOTT	7 ANTHONY COURT NEWPORT, RI 02840 USA
DIRECTOR	JAMES BANKS	PO BOX 1488 HILLSBOROUGH, NH 03244 USA
DIRECTOR	MALINA JACOBOWITZ	9513 SHEPHERD HILLS DR. LORTON, VA 22079 USA
DIRECTOR	CYNTHIA LIMA	919 HORIZON DR. FRANKLIN, TN 37064 USA
DIRECTOR	KEVIN HORST	15 DELANO WAY SO. DARTMOUTH, MA 02748 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

ARMANDO E. BATASTINI NIXON PEABODY LLP ONE CITIZENS PLAZA, SUITE 500 PROVIDENCE ,  
RI 02903

**8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 9 Day of May, 2022 at 10:03:28 AM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.**

By HEATHER ABBOTT  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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